

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

Mr. DAVIS of Illinois. Madam Speaker, it is my pleasure to yield such time as he might consume to the sponsor of this legislation, Representative EMANUEL CLEAVER of Missouri.

Mr. CLEAVER. Madam Speaker, I very proudly stand here today to recommend the Reverend Dr. Wallace S. Hartsfield, a minister in the Fifth Congressional District, which I very proudly serve, be given the honor of having a postal facility named in his honor at 4320 Blue Parkway in Kansas City, Missouri. All nine members of the Missouri delegation have signed on to this bill, and they signed on for one real reason. It is this:

Rev. Hartsfield is an American story. He was born in Atlanta, Georgia, on November 12 in 1929. He was raised by his mother. He was the only child and yet she worked and struggled and pushed him. He eventually graduated from high school and then served a 3-year tour of duty with the United States Army. He returned to this country and attended Clark College, which is now called Clark Atlanta University. He received a bachelor's degree, and then he went on to receive a Master's of Divinity at Gammon Theological Seminary, which is known as the Interdenominational Theological Seminary today. He's received a number of honorary doctorate degrees, and he is recognized in our community as a man who is always going to be where something good is happening.

He has been a strong worker in the field of diversity. He is a man who has been able to bring the clergy together from across racial and even religious lines. He's known as the dean of preachers in our community, and I dubbed him the "Godfather of Preachers" because of the respect he receives from members of the clergy. Anytime anything in our community is going on that is productive and meaningful, you can expect to see Rev. Wallace S. Hartsfield present.

This postal designation is the first I've ever introduced, and one of the reasons that I feel strongly about this is the post office delivers mail to everyone, and if you look at the life and work of the Reverend Wallace S. Hartsfield, that is exactly what he's done. He has delivered ministry, friendship and civic concern to everyone in our community, and so a post office, I think, is very, very appropriate to bear his name.

And so, Madam Speaker, it would be my hope that this body would allow our community to celebrate fully his retirement at a November 9 banquet, during which time I would like to proudly announce that the United States Congress has named a post office in his honor.

Ms. FOXX. Madam Speaker, I yield myself as much time as I may consume.

I rise today to pay tribute to Rev. Wallace S. Hartsfield, a family man, community activist, and man of God.

Rev. Hartsfield was born in Atlanta, Georgia, on November 12, 1929. After a 3-year tour of duty with the United States Army, he went on to receive a bachelor of arts degree from Clark College, now Clark Atlanta University. Three years later, in 1957, he received a Master of Divinity degree.

The list of honorary degrees Rev. Hartsfield has earned is long and distinguished. They include a Doctor of Divinity from both Western Baptist Bible College in Kansas City, Missouri, and Virginia Seminary and College of Lynchburg, Virginia.

While his list of academic accomplishments is impressive, the work he has done since the end of his formal education is even more so. His first pastorate was in Pickens, South Carolina, and he served in the States of Kansas, Florida, and Georgia before settling into a position at the Metropolitan Missionary Baptist Church located in Kansas City, Missouri, a place he has preached for over 40 years.

Rev. Hartsfield will retire on January 1, 2008, as senior pastor. During his long service to the church, he became affectionately known as the dean of Kansas City Ministers; and the cosponsor of this bill, Mr. CLEAVER, has nicknamed him the Godfather of Preachers because of the knowledge he possesses and his impressive oratory skills. He has become a mentor not only for those in the local ministry, but for community leaders as well.

His steadfast dedication to Kansas City and the surrounding area have helped solidify the community and shape it into what it is today. However, his leadership and influence have extended well beyond the boundaries of his duty as a minister. He has fought to promote, protect, and ensure civil liberties for all races, not only at home but across the Nation. And he served as president of the greater Kansas City chapter of Operation PUSH, an organization dedicated to the promotion of religious and social development and human rights.

He is a former chairman of the Congress of National Black Churches that represents over 65,000 churches. He has also served in many positions within the National Baptist Convention of America.

The reverend was appointed by the Governor to serve as commissioner on the Missouri Highway Commission and was at the forefront of efforts to construct the Metropolitan Homes, a 60-unit low-income housing development.

Despite all of his work and the demands for his time and attention, they did not detract from his love for his family. The reverend just celebrated his 50th anniversary with his wife, Matilda Hopkins. They are the proud parents of four children.

Madam Speaker, I ask that my colleagues join me, Mr. CLEAVER, and all of the members of the Missouri delega-

tion in congratulating Rev. Hartsfield on his retirement, wish him well in his new endeavors, and join us in supporting the naming of the post office facility on Blue Parkway in Kansas City in his honor.

Madam Speaker, I reserve the balance of my time.

□ 1545

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I may consume.

As a member of the House Committee on Oversight and Government Reform, I am pleased to join my colleague in the consideration of H.R. 3572, which names a postal facility in Kansas City, Missouri, after Wallace S. Hartsfield, Sr.

H.R. 3572, which was introduced by Representative EMANUEL CLEAVER on September 18, 2007, was reported from the Oversight Committee on October 4, 2007, by voice vote. This measure has the support of the entire Missouri congressional delegation.

Madam Speaker, Rev. Dr. Wallace S. Hartsfield, Sr.'s dedication and service to the people of Kansas City goes back many years. He is a committed community activist, civil servant, and has served as the senior pastor of the Metropolitan Missionary Baptist Church since 1972. He is the vice president-at-large of the Economic Development Commission of the National Baptist Convention of America, Incorporated. He is a former chairman of the Congress of National Black Churches and past president of the General Baptist State Convention of Missouri, Kansas, and Nebraska. He has served as an adjunct professor and guest lecturer at numerous colleges and universities.

Rev. Hartsfield is a well-respected man of faith, and on January 1, 2008, he will retire as senior pastor of the Metropolitan Missionary Baptist Church.

So, Madam Speaker, I commend my colleague, the Reverend Representative EMANUEL CLEAVER, for introducing this legislation. I enthusiastically support this legislation and urge its passage.

Madam Speaker, I reserve the balance of my time.

Ms. FOXX. Madam Speaker, I urge all Members to support the passage of H.R. 3572.

Madam Speaker, I yield back the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. CAPPS). The question is on the motion offered by the gentleman from Illinois (Mr. DAVIS) that the House suspend the rules and pass the bill, H.R. 3572.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair

declares the House in recess until 4 p.m. today.

Accordingly (at 3 o'clock and 47 minutes p.m.), the House stood in recess until 4 p.m. today.

□ 1600

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Ms. BERKLEY) at 4 p.m.

MELANIE BLOCKER-STOKES POSTPARTUM DEPRESSION RESEARCH AND CARE ACT

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 20) to provide for research on, and services for individuals with, postpartum depression and psychosis, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 20

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Melanie Blocker-Stokes Postpartum Depression Research and Care Act".

SEC. 2. FINDINGS.

The Congress finds as follows:

(1) Postpartum depression is a devastating mood disorder which strikes many women during and after pregnancy.

(2) Postpartum mood changes are common and can be broken into three subgroups: "baby blues", which is an extremely common and the less severe form of postpartum depression; postpartum mood and anxiety disorders, which are more severe than baby blues and can occur during pregnancy and anytime within the first year of the infant's birth; and postpartum psychosis, which is the most extreme form of postpartum depression and can occur during pregnancy and up to 12 months after delivery.

(3) "Baby blues" is characterized by mood swings, feelings of being overwhelmed, tearfulness, irritability, poor sleep, mood changes, and a sense of vulnerability.

(4) The symptoms of postpartum mood and anxiety disorders are the worsening and the continuation of the baby blues beyond the first days or weeks after delivery.

(5) The symptoms of postpartum psychosis include losing touch with reality, distorted thinking, delusions, auditory hallucinations, paranoia, hyperactivity, and rapid speech or mania.

(6) Each year over 400,000 women suffer from postpartum mood changes, with baby blues afflicting up to 80 percent of new mothers; postpartum mood and anxiety disorders impairing around 10 to 20 percent of new mothers; and postpartum psychosis striking 1 in 1,000 new mothers.

(7) Postpartum depression is a treatable disorder if promptly diagnosed by a trained provider and attended to with a personalized regimen of care including social support, therapy, medication, and when necessary hospitalization.

(8) All too often postpartum depression goes undiagnosed or untreated due to the social stigma surrounding depression and mental illness, the myth of motherhood, the new mother's inability to self-diagnose her condition, the new mother's shame or embarrassment over discussing her depression so near to the birth of her child, the lack of understanding in society

and the medical community of the complexity of postpartum depression, and economic pressures placed on hospitals and providers.

(9) Untreated, postpartum depression can lead to further depression, substance abuse, loss of employment, divorce and further social alienation, self-destructive behavior, or even suicide.

(10) Untreated, postpartum depression impacts society through its effect on the infant's physical and psychological development, child abuse, neglect, or death of the infant or other siblings, and the disruption of the family.

TITLE I—RESEARCH ON POSTPARTUM DEPRESSION AND PSYCHOSIS

SEC. 101. EXPANSION AND INTENSIFICATION OF ACTIVITIES.

(a) *IN GENERAL.*—The Secretary of Health and Human Services, acting through the Director of the National Institutes of Health and the Director of the National Institute of Mental Health (in this title referred to as the "Institute"), is encouraged to continue aggressive work on postpartum depression and postpartum psychosis.

(b) *COORDINATION WITH OTHER INSTITUTES.*—The Director of the Institute should continue to coordinate activities of the Director under subsection (a) with similar activities conducted by the other national research institutes and agencies of the National Institutes of Health to the extent that such Institutes and agencies have responsibilities that are related to postpartum conditions.

(c) *PROGRAMS FOR POSTPARTUM CONDITIONS.*—In carrying out subsection (a), the Director of the Institute is encouraged to continue research to expand the understanding of the causes of, and to find a cure for, postpartum conditions. Activities under such subsection shall include conducting and supporting the following:

(1) Basic research concerning the etiology and causes of the conditions.

(2) Epidemiological studies to address the frequency and natural history of the conditions and the differences among racial and ethnic groups with respect to the conditions.

(3) The development of improved screening and diagnostic techniques.

(4) Clinical research for the development and evaluation of new treatments, including new biological agents.

(5) Information and education programs for health care professionals and the public.

SEC. 102. NATIONAL PUBLIC AWARENESS CAMPAIGN.

(a) *IN GENERAL.*—The Director of the National Institutes of Health and the Administrator of the Health Resources and Services Administration are encouraged to carry out a coordinated national campaign to increase the awareness and knowledge of postpartum depression and postpartum psychosis.

(b) *PUBLIC SERVICE ANNOUNCEMENTS.*—Activities under the national campaign under subsection (a) may include public service announcements through television, radio, and other means.

SEC. 103. BIENNIAL REPORTING.

Section 403(a)(5) of the Public Health Service Act (42 U.S.C. 283(a)(5)) is amended—

(1) by redesignating subparagraph (L) as subparagraph (M); and

(2) by inserting after subparagraph (K) the following:

"(L) Depression."

SEC. 104. LONGITUDINAL STUDY OF RELATIVE MENTAL HEALTH CONSEQUENCES FOR WOMEN OF RESOLVING A PREGNANCY.

(a) *SENSE OF CONGRESS.*—It is the sense of Congress that the Director of the Institute may conduct a nationally representative longitudinal study (during the period of fiscal years 2008 through 2018) of the relative mental health consequences for women of resolving a pregnancy (intended and unintended) in various ways, in-

cluding carrying the pregnancy to term and parenting the child, carrying the pregnancy to term and placing the child for adoption, miscarriage, and having an abortion. This study may assess the incidence, timing, magnitude, and duration of the immediate and long-term mental health consequences (positive or negative) of these pregnancy outcomes.

(b) *REPORT.*—Beginning not later than 3 years after the date of the enactment of this Act, and periodically thereafter for the duration of the study under subsection (a), the Director of the Institute should prepare and submit to the Congress reports on the findings of the study.

TITLE II—DELIVERY OF SERVICES REGARDING POSTPARTUM DEPRESSION AND PSYCHOSIS

SEC. 201. ESTABLISHMENT OF PROGRAM OF GRANTS.

(a) *IN GENERAL.*—The Secretary of Health and Human Services (in this title referred to as the "Secretary") should in accordance with this title make grants to provide for projects for the establishment, operation, and coordination of effective and cost-efficient systems for the delivery of essential services to individuals with postpartum depression or postpartum psychosis (referred to in this section as a "postpartum condition") and their families.

(b) *RECIPIENTS OF GRANTS.*—A grant under subsection (a) may be made to an entity only if the entity is a public or nonprofit private entity, which may include a State or local government; a public or nonprofit private hospital, community-based organization, hospice, ambulatory care facility, community health center, migrant health center, or homeless health center; or any other appropriate public or nonprofit private entity.

(c) *CERTAIN ACTIVITIES.*—To the extent practicable and appropriate, the Secretary shall ensure that projects under subsection (a) provide services for the diagnosis and management of postpartum conditions. Activities that the Secretary may authorize for such projects may also include the following:

(1) Delivering or enhancing outpatient and home-based health and support services, including case management, screening, and comprehensive treatment services for individuals with or at risk for postpartum conditions; and delivering or enhancing support services for their families.

(2) Delivering or enhancing inpatient care management services that ensure the well-being of the mother and family and the future development of the infant.

(3) Improving the quality, availability, and organization of health care and support services (including transportation services, attendant care, homemaker services, day or respite care, and providing counseling on financial assistance and insurance) for individuals with postpartum conditions and support services for their families.

(d) *INTEGRATION WITH OTHER PROGRAMS.*—To the extent practicable and appropriate, the Secretary should integrate the program under this title with other grant programs carried out by the Secretary, including the program under section 330 of the Public Health Service Act.

SEC. 202. CERTAIN REQUIREMENTS.

A grant may be made under section 201 only if the applicant involved makes the following agreements:

(1) Not more than 5 percent of the grant will be used for administration, accounting, reporting, and program oversight functions.

(2) The grant will be used to supplement and not supplant funds from other sources related to the treatment of postpartum conditions.

(3) The applicant will abide by any limitations deemed appropriate by the Secretary on any charges to individuals receiving services pursuant to the grant. As deemed appropriate by the Secretary, such limitations on charges may vary based on the financial circumstances of the individual receiving services.